

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		7-26-99
O.I.P.E. CLASSIFIER		59	7-30
FORMALITY REVIEW		65955	8/10

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	Original
1	5/27/99
2	✓
3	0
4	1
5	1
6	✓
7	1
8	1
9	0
10	1
11	1
12	1
13	✓
14	✓
15	—
16	1
17	1
18	1
19	1
20	1
21	✓
22	—
23	1
24	1
25	1
26	1
27	1
28	✓
29	1
30	1
31	—
32	0
33	1
34	1
35	1
36	✓
37	1
38	1
39	0
40	✓
41	1
42	1
43	1
44	1
45	1
46	1
47	1
48	1
49	1
50	1

Claim	Date
Final	Original
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions
staple additional sheet here